



Carmina F. Angeles MD/PhD  
74 B Centennial Loop, Suite 100  
Eugene, OR 97401  
Ph (541) 686.3791 Fax (541) 686.3795

## **DISCHARGE INSTRUCTIONS FOR LUMBAR FUSION SURGERY**

It is important to me that you fully understand your postoperative instructions to fully maximize your chances of a successful recovery, minimize the risk of complications, and get back to doing the things you really enjoy!

1. **Bandage/Dressing:** You may remove the dressing over the incision 2-3 days after your surgery. You will have Dermabond or staples over the incision. The dermabond glue should peel off on their own 7 days after the surgery. Please remove them at that time if they have not peeled off. Please be sure that you wash your hands thoroughly before touching your incision.

If you have staples or stitches and you do not have an appointment to see us in 10-14 days, please call us @ **541.284.0538**.

2. Keep the incision area clean and dry. You may shower for 5 mins on the 3<sup>rd</sup> day with the incision area facing away from the shower stream. After you shower, pat the wound dry and keep it clean. Do not soak in a bathtub, hot tub, or swim until you are instructed otherwise. Do not put anything on the incision including ointments or creams.
3. If the incision area becomes red, swollen, hot, extremely tender, or if it begins to drain fluid or blood, please contact our office immediately.
4. **If you go home with your drain,** it is important that you observe the following instructions to care for your drain:
  - a. Keep the drain from being pulled or snagged.
  - b. Empty drain bulb when it is half full. Keep a running total of how much fluid you empty. Squeeze the bulb when applying the plug to maintain the vacuum. The bulb should be collapsed, not round.
  - c. Keep the drain in until it drains less than 30cc in 8 hours.

To remove the drain:

- a. Remove the gauze over the drain.
- b. Pull drain firmly and steadily until white portion is completely out.

- c. Apply a clean sterile dressing over the opening, you may need to change it daily until it is dry or it seals over.

If you have questions or concerns, about your drain, call our office @ (541) 686-3791.

5. **Exercise/Restrictions:** Your only exercise during the first week following your surgery should be leisurely walking. This should be on ground level only; no hiking. Walk 2-3 times a day (10-15 min) on level ground followed by a 3-5 minute rest. You may walk up and down stairs if needed. Do not perform back exercises until you are authorized to do them by my office or physical therapist. Do not do any physical activities or contact sports unless specifically authorized to do so by me.
6. During the first three months after surgery you should limit lifting to 5-10 pounds. Any increase in your lifting limit should be authorized by me. Avoid any activities that put stress on your back such as bending, twisting, stooping, pushing, or pulling.
7. **Driving:** No driving for 2 weeks or during continued use of pain medication. You may find that driving for over 15-20 minutes at a time will cause increase in back pain in that first few weeks after surgery. This should gradually improve over time.
8. Avoid prolonged sitting the first 2-3 weeks after surgery. You may sit for meals and in the bathroom, but any prolonged sitting may aggravate your back pain in the first month after surgery. If you are planning on reading or watching television, for example, it is preferable to either stand, recline, or at least alternate positions from sitting every 15-20 minutes. This too will gradually improve over time.
9. Do not return to work without approval from me.
10. **Common Symptoms:** It is normal to experience intermittent leg pain, numbness or tingling in the first few weeks after surgery. You may also experience muscle spasms around the surgical site for several days to weeks after surgery. Muscle spasms respond well to the application of ice packs or a heating pad. You may use an ice pack on either side of the incision but not directly on the incision, and you may apply ice packs for 20 minutes at a time as many times per day as you wish. For some people, heating pads work better. The same rules apply for application method and frequency. Be careful not to burn yourself. Either of these modalities, along with your muscle relaxants, should provide some relief. These symptoms are temporary and will eventually clear up with time. If you are experiencing muscle spasms please curb your activities during this time, as activity can increase them.
11. If you had muscle weakness or numbness in the legs before surgery, these symptoms may take several weeks to months to improve.
12. **Medication:** Your medications are prescribed to you to be taken “as needed”. This means that if you are not experiencing any significant pain, you need not

take any. You are not placing yourself in any danger by not taking these medication. On the other hand, if you feel you are significantly uncomfortable, please do not exceed the directions on the bottle unless specifically directed. Most pain medications have Tylenol (Acetaminophen) in them. Do not take any additional Tylenol or generic acetaminophen, as too much may harm your liver.

13. If you have been on narcotic pain medication such as: Oxycontin, Oxycodone, Kadian, MS Contin, or Fentanyl patches prior to your surgery, please do not stop them abruptly. If your acute post operative pain improves you will need to be tapered off of these medications gradually by us or by a pain doctor to avoid withdrawal symptoms. Withdrawal symptoms include chills, goosebumps, nausea, vomiting, and diarrhea.
14. **Medication Refills:** If you require medication refills, please call the office during business hours which are between 8:00-5:00 Monday through Thursday or call your pharmacy. Please note that we normally have a 48 hour turnaround. Also note that we are unable to refill any medications on Friday, weekends or holidays.

If you live outside of Eugene, some post op pain medication such as Tylox or Percocet, require a written prescription. These medications cannot be called in to your pharmacy. These will require us to mail the prescription to you, so allow extra time for refills.

15. Do NOT smoke or inhale any second hand smoke- to do so increase your risk of fusion failure!! Also there is evidence that anti-inflammatories such as Ibuprofen and Naproxen can interfere with the fusion process, so do not take any type of this medication without first contacting us.
16. **Brace:** If you have had a lumbar fusion, your doctor has ordered a brace. You are to wear this when up, sitting, standing, and walking. You may remove the brace when showering and resting in bed.

The brace should be removed 3 times a day to allow the incision site to air dry. This can be done by lying on your side for 10-15 minutes. This usually begins once the bandage is removed.

17. **PLEASE CALL THE OFFICE: If you have any signs of infection (fever, chills, extreme soreness, redness, or drainage of the incision. If you have significantly increased pain not relived by your pain medications, difficulty walking, and difficulty passing your urine or moving your bowels.**

If you have any other questions or concerns not covered in these instructions, please feel free to call the office at 541.284.0538.

**ASPIRIN MUST BE STOPPED 14 DAYS PRIOR TO YOUR PROCEDURE.**

To My Patients Who Will Undergo a Cervical or Lumbar Fusion:

**Medical studies have shown that the family of medicines known as “Nonsteroidals” or anti-inflammatories (NSAIDS) may increase bleeding at surgical sites, and affect your body’s ability to fuse the bony area of the spine where your surgery was performed.** If fusion does not take, you may require other surgical procedures. **These medications include both prescription and over-the-counter types.** We ask that you not take any of the medicines listed below **two weeks** before your surgery and until we tell you that your neck or back has successfully fused (90 days minimum) after surgery. In addition, do not take any weight reduction medications. Please call our office if you have any questions.

<b><u>Brand Name</u></b>	<b><u>Generics</u></b>	<b><u>Over the Counter</u></b>
Anaprox	celecoxib	Advil
Anaprox DS	diclofenac	Aleve
Ansaid	diflunisal	Alka Selzer
Arthrotec	etodolac	Anacin
Bextra	fexicam	Arthritis Pain Formula
Cataflam	flurbiprofen	Arthritis Strength
Celebrex	ibuprofen	Bufferin
Clinoril	ketoprofen	BC tablets & powder
Daypro	nabumetone	Carisoprodol Compound
Dolobid	naproxen	Cama Arthritis tablets
Feldene	mefanamic acid	CoAdvil
Fiorgesic tablets	meloxicam	Damson-P
Indocin	misoprostol	Dia-Gesic Improved
Lodine	oxaprozin	Doan’s Pills
Lodine XL	piroxicam	Easprin
Mobic	refecoxib	Ecotrin
Motrin	sulindac	Emparin
Naprelan	tolmetin	Eqagesic tabs
Naprosyn	valdecoxib	Excedrin
Norgesic	oruvail	4-way Cold tablets
Orudis	ketorolac	Gelprin Tablets
Percodan		Midol
Ponstel		Nuprin
Relafen		Pepto-Bismal
Tolectin		Persistin
Tolectin DS		Roxiprin
Toradol		Zoprin
Vioxx		
Voltaren		
Voltaren-XR		